## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



or <u>Fax</u>

(703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as

ndicated unless corrected b maintenance fee notification	elow or directed otherwise	in Block I, by (a) specifying	a new correspondence address;	; and/or (b) indicating a sepa	rate "FEE ADDRESS" for
	E ADDRESS (Note: Use Block I for a	my change of address)	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
24309 75	90 04/26/2005		have its own certificat	e of mailing or transmission.	
XILINX, INC		$C I \sim$	Cer	rtificate of Mailing or Trans	mission
24309 1590 04/26/2005  XILINX, INC  ATTN: LEGAL DEPARTMENT 2100 LOGIC DR SAN JOSE, CA 95124  Certificate of Mailing or Transmission  I hereby certify that this Fec(s) Transmittal is being deposited with the States Postal Service with sufficient postage for first class mail in an en addressed to the Mail Stop ISSUE FEE address above, or being fact transmitted to the USPTO (703) 746-4000, on the date indicated below.  [Depositor]					
2100 LOGIC DR	1	$\mathcal{F}_0$	addressed to the Mai	Il Stop ISSUE FEE address 270 (703) 746-4000, on the c	above, or being facsimile late indicated below.
SAN JOSE, CA 95	124	/	Julie Ma	tthews //	(Depositor's name)
	•		00110 110	16 0 .//	(Signature)
			June 28,	2005 ( Lilia / L	(Date)
APPLICATION NO.	FILING DATE	FIRST NAME	D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/082,630	02/22/2002	Robe	ent Yin	X-1070 US	4447
TITLE OF INVENTION: METHOD AND SYSTEM FOR CONTROLLING DEFAULT VALUES OF FLIP-FLOPS IN PGA/ASIC-BASED DESIGNS					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	07/26/2005
EXAMINER		ART UNIT	CLASS-SUBCLASS	7	
PERVEEN, REHANA		2116	713-001000	-	
1. Change of correspondence CFR 1.363).	e address or indication of "Po	•	For printing on the patent front page, Jist i) the names of up to 3 registered patent attorneys		
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  Or agents OR, alternatively,  (2) the name of a single firm (having as a member a					
"Fee Address" indicate PTO/SB/47; Rev 03-02 (Number is required.	tion (or "Fee Address" Indica or more recent) attached. Use	tion form registere 2 registere 2 registere	stered attorney or agent) and the names of up to gistered patent attorneys or agents. If no name is 3		
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)					
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.					
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)					
XILINX, INC. 2100 Logic Drive, San Jose, CA 95124					
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual Corporation or other private group entity 🚨 Government					
4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):					
Issue Fee		_	theck in the amount of the fee(s) is enclosed.		
_	small entity discount permitte		Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to osit Account Number 24-0040 (enclose an extra copy of this form).		
Advance Order - # or	r Copies	Deposit Ac	secount Number $24 - 004$	(cnclose an extra	copy of this form).
5. Change in Entity Status (from status indicated above)					
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).					
The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.  NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Tradernark Office.					
Authorized Signature	tul (1)		Date Ju	une 28, \$2005	
Typed or printed name_	Justin Liu		Registratio	<sub>n No.</sub> 51,959	·
This collection of informati an application. Confidential submitting the completed a this form and/or suggestion Box 1450, Alexandria, Virgalexandria, Virgalexandria, Virginia 22313	pplication form to the USP1 s for reducing this burden, sl rinia 22313-1450. DO NOT	11. The information is require 122 and 37 CFR 1.14. This c O. Time will vary depending hould be sent to the Chief Info SEND FEES OR COMPLETS	d to obtain or retain a benefit by ollection is estimated to take 12 upon the individual case. Any mation Officer, U.S. Patent an ED FORMS TO THIS ADDRES	the public which is to file (ar minutes to complete, include comments on the amount of the d Trademark Office, U.S. De SS. SEND TO Commissioner	id by the USPTO to process) ing gathering, preparing, and ime you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1450,

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.